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ABSTRACT

The role of consultant is one of the more common roles that professional psychologists claim to practice. A description of the consultants' backgrounds, roles, practices, and perceptions of work-related issues, and the relationship among these variables could help educators to better train students in theories and models that professional practitioners use in the field. In an effort to obtain such a description, surveys were completed by a random sample (N=177) of members of the American Psychological Association's Division B: Consulting Psychology. The Survey of Consulting Psychologists contained sections on general information, consulting background and practice, consultation stressors and stress management, education and training of consultants, characteristics of successful consultants, and role boundaries. The results indicated that the current demographic profile of the consulting psychologist appears to be an established professional who is a middle-aged white male with a clinical background. The consultants appeared to work collaterally with upper management in fairly stable, close, professional relationships. They reported valuing their skills in assessment, problem solving, forming close working relationships, and stimulating the thinking of others. A survey of clients of consulting psychologists could be useful in determining the skills and qualities the consultee values when seeking to employ a consultant. (NRB)

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Characteristics of Consulting Psychologists and Their Practices

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Paper presented at the annual convention of the American Psychological Association, Los Angeles, 1985

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ABSTRACT: The role of consultant is one of the more common that professional psychologists claim to practice. This study summarizes the preliminary, descriptive, results of a survey on the professional characteristics, roles, and attitudes, sent to a random sample of the members of APA Division 13 -Consulting Psychology. Consulting psychologists appear to be predominantly middle-aged, white, males, from a clinical background. They appear to work collaterally with upper management in fairly stable, close, professional relationships. It appears that they most value their skills in assessment, problem solving, the ability to form close working relationships and in stimulating the thinking of others. Implications of these preliminary findings and recommendations for future research are also discussed.

In 1983, Division 13 (Consulting Psychology) of APA created an Education and Training Committee, chaired by June Gallessich. The committee's first task was to survey doctoral training programs to identify characteristics of current consultation education and training programs (Gallessich and Watterson, 1984). The next task chosen was to survey practicing psychologist-consultants in order to learn their background characteristics, their typical practices, problems, and their ideas regarding preparation for the consulting role. This paper is a first report of the outcomes of this second project, and is part of a larger project directed by June Gallessich and supported by Division 13-APA and the University Research Institute of the University of Texas at Austin.

The purpose of the investigation was to obtain a general description of consultant's backgrounds, roles, practices, and perceptions of work-related issues and to examine relationships between these variables. By making this information available to university training programs, educators can better train their students in theories and models that professional practitioners are currently using in the field. By addressing the areas in which current consulting psychologists feel they are deficient, educators can train their students to be better prepared when they enter their professional career. This information can also be used by practitioners wanting to improve their current consulting practice and/or to plan for mid-career shifts from other specialties into consulting.

The purpose of the present paper is to report on the basic demographic data (who are consulting psychologists in terms of age, educational and credential characteristics) consulting background, practices (what are they doing, how did they learn it, and who are they doing it with), and characteristics of the successful consultant. As these sections contain a wealth of information only the most significant, descriptive findings are reported rather than a complete statistical breakdown of each individual item.

Richards and Gottfredson (1984) in an analysis of the major accomplishments of psychologists, labeled one of the five factors found from a factor analysis of forty-two, dichotomous, professional, accomplishments; as *Contributions in Applied Research and Consulting*. Such a psychologist was one who had served as an administrator in a governmental agency; had been a principal investigator on substantial projects; been a research consultant; served as a senior officer in a consulting firm, testified before a congressional committee and supervised doctoral-level personnel. They hypothesized that members of APA's Division 13 (Consulting Psychology) would obtain a relatively high score on this factor.

The importance of the various characteristics of consultants themselves, as regarded by their clients, has been discussed by O'Neil and Trickett (1982). They addressed

the xenophobic nature of a group who is being consulted with and the dilemmas faced by both external and internal consultants. They felt that it was important for consultants to evaluate their own characteristics and background to determine possible prejudices which may exist in terms of education or theoretical orientation. Earlier work by Lippitt and Lippitt (1978) also felt it was important for consultants to possess a high degree of self-insight. An analysis of 32 consultants in regards to their perceptions (Lippitt, 1976b, as cited in Lippitt and Lippitt, 1978) of the skills, knowledge, and attitudes that are essential to carry out consultant services, processes and activities; yielded a list of 22 basic competencies. As Lippitt and Lippitt's approach appears to be oriented towards the organizational consultant, it is desired in the current study to determine if these same skills, knowledge, and attitudes apply to consulting psychologists.

While several models and theories of psychological consulting have been developed (i.e. Gallessich, 1982); to date, little research has been found which has looked at the current practice of psychological consultation to determine what skills and qualities are most valued by the practitioners and what models appear to be most relevant to their practice. Though consultation has been found to be an important professional component and milestone accomplishment for psychologists, there has been no research to date, which has specifically assessed consulting psychologists in terms of personal/professional characteristics, skills, attitudes and competencies which comprise their practices. The need for such research has recently been claimed by several authors (i.e. Gallessich, 1985; Bardon, 1985; Manino and Shore, 1985). This paper is, therefore, a report of the preliminary findings of the descriptive characteristics of the members of Division 13, Consulting Psychology.

Methods

The sample population was obtained from the then current (July, 1984) listing of members of Division 13 who resided in the United States. At that time, there were approximately 890 such members, surveys were sent to a randomly selected 50% (n=445) of the members of Division 13. The first mailing of surveys was made in July, 1984, and resulted in the return of 129 surveys (a 29% return rate); the second mailing (to non-respondents) was done in October of 1984 and resulted in 48 additional surveys (a 15% return rate); combining these two mailings yielded 177 surveys for a total return rate of 40%. Possible reasons accounting for the low return rate may have been due to the length of the survey (13 pages) and the mixed response styles requested (use of Likert scales, ranking tasks, open ended questions).

The *Survey of Consulting Psychologists* consisted of six main sections:

- **General Information**- to obtain demographic data on the education, career emphasis and type of setting they work in for their primary and secondary workplaces;
- **Consulting Background and Practice**- to obtain information on the length and type of consulting practice, how consulting skills were acquired, the nature of rewards, models followed, and impressions of important factors which comprise their work;
- **Consultation Stressors and Stress Management**- to investigate the amount and source of stress which consultants experience and how they manage these stressors;
- **Education and Training of Consultants**- to investigate the importance of various types of training programs currently available for consulting psychologists;
- **Characteristics of Successful Consultants**- investigated personal and professional qualities which enhance/interfere

with effective consulting, as well as age, sex, and ethnicity issues; and

• **Role Boundaries**- investigated the appropriateness of potential consulting situations.

The results from the returned surveys were coded and analyzed to derive the descriptive statistics and simple correlational matrices. For all data presented in this and the following papers, blanks were interpreted as missing data and all statistical calculations (percentages, means, standard deviations) are based upon the total number who *responded* to that item (adjusted frequencies), and not upon the total number of respondents (relative frequencies), unless otherwise noted. This is to allow for the numerous missing values observed in the returned surveys.

Results

Personal information: As can be seen from Table I, the majority of the respondents are male and overwhelmingly white. Though there was a reported 67 year range in ages, the mean age was 52.9 yrs.. Approximately, 82% of the respondents are currently married (including second marriages). These demographics would appear to suggest that the average consulting psychologist is an established professional with a stable home life.

Educational background: Table I also shows that 80% of the bacculaureate degrees come from psychology or the humanities. 91% of the respondents had a Ph.D., 5.1%-Ed.D.. The year these degrees were obtained had a range of 51 yrs. (from 1930- 1981), The major area for these degrees are (in order of reporting): clinical, general psychology, other (special ed., ed.psych., guidance and personnel, experimental psych.), and counseling.

Table II shows that approximately 65% of the respondents reported their current, primary, specialty area was in clinical or consulting followed by I/O with less than 10%. However, in terms of secondary specialties, consulting, I/O, and counseling (combined) were reported by approximately 73% of the respondents. Thus, only a quarter of the respondents considered consulting to be their primary function though consulting was the main secondary specialty area.

Professional credentials As can be seen from Table II a third of the respondents hold a diplomate from the ABPP, and less than 20% are a fellow in one or more of the APA divisions. The large majority of respondents are licensed in at least one state (mean=1.49) but only half are a registered health service providers. Table II also shows that the average consulting psychologist has been consulting for an average of 17 years. These results would again confirm not only that the consulting psychologist is a well established professional, but that they obtain credentials beyond their education to enhance their status and identification as psychologists.

A third of the respondents Table III report that their primary workplace is in individual private practice and a quarter in academic/research settings. The other 8 settings all received a fairly equal share of the rest of the respondents. The same pattern of responses was seen in the description of the secondary workplaces with the addition of group private practice now accounting for almost 12% of the respondents. The respondents tend to work the traditional 40 hour week in their primary workplace and additional 11 hours in their secondary workplace.

The primary roles in the the primary workplace appear to be that of consultant, therapist, administrator and teacher, in order of ranking. The role of consultant is also the most dominant secondary role in the primary workplace. Thus, it appears that, in keeping with their educational backgrounds being from clinical programs; many consultants maintain their identification as therapists.

However, the roles of administrator and supervisor are also reported which may serve to further enhance their credentials as consultants.

Consulting Background and Practice As can be seen from Table IV, when the respondents were asked how they acquired their consulting competencies it appears that the majority acquired their skills through trial and error experiences on-the-job and self directed readings. Less than 20% report to have acquired their consultation training through predoctoral consultation training and 25% through an internship that included consultation. Thus, it is of no surprise that "self taught " (trial/error, self-directed readings) consultation skills were rated as being most important in contributing to their consultation skills. Continuing education and apprenticeship with an experienced consultant were ranked as next in importance in acquiring consultant skills. It is most likely that the younger respondents account for those who have received the predoctoral practicum and consultation courses.

When the respondents were asked to rank the most important source of rewards which influenced their decision to become a consultant; the largest portion of the respondents (19.8% relative frequency) felt that it was due to the breadth of the impact they made that was most important. Intrinsic rewards (unspecified) were rated second followed by financial rewards (financial rewards were mentioned as the most common second and third reward).

The respondents were asked to list the most important intrinsic rewards in order of importance. Though this data has yet to be quantified, informal analysis of the written responses appears to yield a general consensus on the consulting psychologists' value of autonomy and independence, the challenging nature of consulting, breadth of impact, the opportunities to use a wide range of psychological skills in a variety of settings, and the satisfaction gained from problem solving.

It appears that consulting, on the average, accounts for 45% of the total earned income of the respondents (Table IV). However, there was considerable variation as to the amounts garnered from consultation. The most often reported income (n=12) was in the >$100,00 range.

From Table V, it can be seen that the average respondent spends approximately 17 hours a week in consulting in their primary job (mentioned earlier). Almost three quarters of the respondents consider themselves *external* consultants (those who maintain a base of operations outside the client organization and who receive a fee for their services). Slightly less than a third consider themselves *internal* consultants (those who are based inside the client organization as salaried employees).

Of those who consult outside their primary job, (relative frequency=40%), they spend an average of 5 hours consulting, however, there is considerable, individual variation. In this role of secondary consulting; the great majority (adjusted frequency=88%) are external consultants.

It appears that those who are external consultants consult with an average 6 different organizations. Approximately, 16% of the respondents claim to consult with more than 10 organizations.

As can be seen in Table V, the question dealing with number and type of organization they consult with, received a relatively low response rate (N<61). However, of those who responded to the items, the most consult with business and industry, with an average of seven clients, almost half of the respondents consult with three or less business and industry clients. The other common types of client organizations are public sector human services and hospital/medical settings.

Only about half of the total respondents responded to the item dealing with length of time of consultation (Table VI). Of those who did answer this item, it appears that consultation is generally a stable relationship with most of the respondents claiming to consult for more than a year with any given client. This is also reflected in the number of direct contacts with the client organization where most of the respondents claim more than 20 direct contacts. This would lead one to speculate about the potential importance of personal/professional qualities in maintaining such close, enduring work with several professional clients. However, almost half of the respondents also claim to frequently experience fewer than five direct contacts. Most consulting contacts are with individuals and almost a third are with groups. Most of the consultation is done by an individual and not as part of a team. When they do consult as part of team, there are usually 2-3 associates and an informal analysis of untabled data suggests that these colleagues are from a variety of fields (business, medical, social work).

A very important question concerned what models of consultation the practitioners emphasized in their work (Table VII). At least three quarters of the total sample answered this question. The consultation model reportedly used by most of the consultants is the organizational model (which focuses on some aspect of an organization such as decision-making processes, management or team conflicts), 58% report using this model frequently. The next two most popular consulting models of equal popularity are: the clinical model (consulting in a non-medical setting in the traditional clinical model of diagnosing individual or organizational problems and recommending remedial treatment or solutions), and the education and training model (planning and/or presenting seminars, leading workshops, designed to increase clients' knowledge and skills). The other models reported to be used on a less frequent basis, with the psychiatric liason model (working within medical settings in a traditional clinical or psychiatric liason model of consulting with physicians or other staff) being used the least frequently by this subject group.

Table VII shows that all levels of an organization are subject to consultation, though most frequently the consultant works with upper management. 79% of the respondents to this item report working frequently with upper management other than the CEO, however 60% work frequently with the CEO. Only a quarter of the respondents frequently work with the organization's clients or consumers.

In response as to why they think they are asked to consult, the results in Table VII would suggest that the great majority feel it is to frequently solve problems, followed by working for developmental goals, coping with a crisis and preventing problems. The respondents felt that they were less likely to be asked to be involved in strategic planning.

In response to the open ended question on what areas of psychological expertise do they most often use; informal analysis of untabled data found that the consultants report that they most often rely upon general assessment skills (individual and organizational), systems theory and research methodology. These responses would again to appear to suggest that they rely most upon their clinical training for consultation.

In rating the extent to which certain functions are characteristic of their consulting, the most frequently used functions appear to be those which accentuate the psychologists' skill in enhancing cognitive awareness in an objective and facilitative manner. The consulting psychologists report that they are most frequently used to stimulate the consultee's thinking, offer a different

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perspective, recommend particular actions and to facilitate the problem-solving processes. The least utilized function appears to be in supporting specific political values, encouraging support for certain social values, or in assisting a staff to handle a short-term overload.

These patterns were also reflected in the responses to the open-ended question (untabled data) regarding what the consultants felt were their most crucial contributions. The most common responses appeared to be those of problem solving, evaluation and assessment, being a catalyst, and providing a fresh perspective. Other common responses were: aiding in personnel selection, increasing staff efficiency, and using specific expertise.

When asked who typically decides the goals and directions of the the consultation there was general agreement in the use of a collaborative model (Table VIII). 81% reported that the consultee and the consultant together make most of these decisions. Only 9% reported the consultant making all of these decisions and 16%, the consultee making these decisions.

It appears that consultants are eclectic in regard to the theories they use. In response to the open ended question as to what theories they found most influential, there appeared to be no clear consensus. The most common responses appeared to be systems theory, behaviorism, learning and personality theories. Thus, it appears that the consulting psychologist relies upon a broad base of theoretical orientations and does not adhere to one theoretical framework.

In response to the open ended question as to what their greatest consulting strengths were, the consulting psychologists felt it was in the areas of their diagnostic skills (individual and organizational), problem solving, listening-communication skills, and professional experience. One psychologist termed it called it ".. a good ear, a good eye, a good heart and an analytic mind", this response seems to exemplify the complex use of the self in consultation.

The respondents were asked to list the areas in which they would like to increase their effectiveness as a consultant. Most respondents felt they needed more information about the business community, computers, and the business environment (a need for specific business expertise and understanding), and an oft mentioned desire for better marketing skills with which to present their consultation skills.

When asked in an open ended format, what professional competencies are considered most important for effective consulting, most mentioned were listening-communication skills, breadth of knowledge (psychological and general areas), assessment skills, conceptual-analytical abilities, and breadth of professional experience. These responses appear to reflect the experience level and age of the respondents addressed earlier in this paper.

Attitudes about personal characteristics

The personal skills felt to be most important for effective consultation were listed in response to open question format. The respondents listed the most important personal skills as integrity, interpersonal skills (sincerity, personality/ warmth), resilence/flexibility, intelligence, and self-confidence. These responses appear to reflect the psychological knowledge of human nature which would enhance the establishment of fairly stable professional relationships in an otherwise very competitive business environment.

In response to the open-ended question as to what personal and/or professional skills which interfere with consultation, the respondents most often listed arrogance, overselling of self and skills, and offering services outside of one's area of expertise. The

above interfering qualities appear to be most at odds with APA ethical guidelines (offering services outside the area of one's area of expertise) and common knowledge about interpersonal relationships.

As can be seen in Table IX, the majority of the respondents feel that clients are influenced by the age of the consultant in the decision of hiring a consultant. 45% of the respondents felt that age preferences were strong-very strong. The age span felt to be most desired was 40-49 yrs. (just below the age of the average respondent reported earlier). The next most preferred age span was 50-59 yrs. followed by 30-49 yrs.. These results may imply that for the younger consultant's, it may be to their advantage to be associated with an older, established, consultant to "open the doors" and allow entry into an organization.

When asked whether client's hiring decisions are influenced by the consultant's sex, most of the respondents felt that it was with men being overwhelmingly the preferred sex. 47% of the respondents felt that sex preferences were strong-very strong in influencing client's hiring decisions. As with the younger consultants, female consultants may find it to their advantage to be associated with an established consultant (male or female) to gain the initial experience that appears to be necessary before attempting to establish an independent, private practice.

The same pattern of responses appears to be true in regards to ethnicity where clients appear to be influenced by the ethnicity of the consultant. This preference is rated as strong a age or sex preference with 47% feeling the ethnicity preference to be strong-very strong. Whites and Asians appeared to be the most preferred ethnicities with Hispanics and Black preference rated equally. The implications for minority consultants appear to be the same as for women and young consultants in becoming associated with established consultants until they have had opportunity to gain the necessary experience for individual, private practice (if desired).

Discussion

From the wealth of information obtained from the survey, it is felt some very basic facts were obtained which will require more in depth analysis to confirm their significance and relationship with other variables. The current demographic profile of the consultant appears to reflect an established professional who is a middle-aged white male with a clinical background. He appears to have a very broad professional experience in psychology and rely heavily upon their assessment, conceptual, and interpersonal skills. Of concern to trainers in consultation is the fact that most of the respondents to this survey feel they essentially taught consultation skills to themselves. However, many consultants feel they need to enhance their knowledge of the business community, even to the extent of how to best market their own consulting skills.

The consulting psychologists surveyed appear to be in general agreement with the 22 basic consulting competencies as outlined by Lippitt and Lippitt (1978). Consulting psychologists appear to emphasize their own breadth of knowledge in the areas of: behavioral sciences, self insight, individual and organizational dynamics. They feel their important skill areas are in individual and organizational assessment and systems, systems analysis and problem solving. Important professional attitudes emphasized integrity, adherence to ethical values, interpersonal warmth and positive regard.

Those who are planning on entering the professional practice of consultation upon completion of their graduate work, may find it to their advantage to emphasize consulting based upon use of specific technologies (i.e. personality/organizational assessment, and systems theories) until they gain the breadth

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of experience mentioned as necessary to practice as the more general consultant; advising at all levels of an organization (especially the upper levels) on a variety of problem solving activities.

Of concern to all consultants (and consultees) is the suggested finding that consultants may, in part, be hired on the basis of their matching with the consultee's demographic background. As the consultants in this survey were found to work more with the upper levels of management in business/industry and governmental agencies; it is quite possible that the demographic backgrounds may be very similar to the consultees' demographic background. If one of the key roles for the consulting psychologist is to be in providing objective opinions and new perspectives, this process may be prejudiced by the consultee hiring a consultant who is similar in age, sex, ethnicity, marital status, and economic background. It would potentially be of benefit to all concerned; if attention was given to develop more heterogenous consulting apprenticeships, teams, and partnerships.

It would be helpful to analyze the data in terms of what role if any, age and experience play in determining the characteristics of the consultant's role and perception. This would aid young consultant's in planning their training and initial entry into the field. The relationship between being licensed as a psychologist or a health service provider and the type of consulting done could shed important light on necessary credentials for various kinds of consultant roles. It would also be very informative to assess the clients of consulting psychologists to determine the skills and qualities the consultee values when seeking to employ a consultant.

REFERENCES

Bardon, J. I. (1985). On the verge of a breakthrough. *The Counseling Psychologist*, 13 (3), 355-362.

Gallessich, J. (1982). *The profession and practice of consultation*. San Fransico: Jossey-Bass.

Gallessich, J. and Watterson, J. (1984). *Consultation education and training in APA-accredited settings: An overview*. Paper presented at the 92nd annual meeting of the American Psychological Association, Toronto, Canada.

Gallessich, J. (1985). Toward a metatheory of consultation. *The Counseling Psychologist*, 13 (3), 336-354.

Lippitt, G. and Lippitt, R. (1978). *The consulting process in action*. La Jolla, University Associates.

Manino, F. V. and Shore, M.F. (1985). Understanding consultation: Some orienting dimensions. *The Counseling Psychologist*, 13 (3), 363-367.

O'Neill, P and Trickett, E. (1982). *Community consultation*. San Fransico: Jossey Bass.

Richards, J. and Gottfredson, G. (1984). Patterns of accomplishment among psychologists. *The American Psychologist*, 39 (12), 1352-1356.

TABLE I

Variable	N	Adj. Freq.	
Sex: Male	147	85.5%	
Female	25	14.5%	
Ethnicity: White	165	97.1%	
Black	3	1.8%	
Asian	1	.6%	
Hispanic	1	.6 %	
	N	Mean	Std. Dev.
Age:	170	52.95	14.31
Marital Status:	N	Adj. freq.	
Married	132	76.7%	
Remarried	9	5.2%	
Single	27	15.7%	
Single, living with partner	4	2.3%	
Undergraduate Major:			
Psychology	108	62.4%	
Humanities	27	15.6%	
Other	38	22.0%	
Highest Degree:			
Ph.D.	161	92.0%	
Ed.D.	9	5.1%	
Psy.D.	2	1.1%	
Graduate Major:			
Clinical	59	35.1%	
General	39	23.2%	
Education	30	17.9%	
Counseling	21	12.5%	
Personality/Dev.	6	3.4%	
Social	6	3.4%	

Table II

Current Primary, Secondary, and Tertiary Psychology Specialty Areas:

	N	Adj. Freq.
Primary:		
Clinical	66	39.1%
Consulting	43	25.4%
I/O	15	8.9%
Counseling	14	8.3%
Secondary:		
Consulting	58	36.9%
I/O	31	19.7%
Counseling	23	14.6%
Clinical	16	10.2%
Tertiary:		
Counseling	26	20.6%
I/O	24	19.0%
Consulting	23	18.3%
Clinical	16	12.7%

Fellow of at least one APA Division: N= 35 Relative Frequency = 19.77%

	N	Adj. Freq.
Diplomate from ABPP:		
Yes	53	30.3%
No	122	69.7%
Licensed as a Psychologist:		
Yes	150	86.2%
No	24	13.8%
Registered Health Service Provider:		
Yes	83	49.1%
No	86	50.9%

	Mean	Median	Std. Dev.
Years Consulting:	17.1	14.9	10.1

Table III

Primary Workplace:

	N	Adj. Freq.
Individual Private Practice	53	32.7%
Academic/Research Institution	41	25.3%
Private Sector Human Services Organization	13	8.0%
Business/Industrial Organization	12	7.4%
Group Private Practice	11	6.8%

Secondary Workplace:

	N	Adj. Freq.
Individual Private Practice	29	34.1%
Academic/Research Institution	14	16.5%
Group Private Practice	10	11.8%
Private Sector Human Services Organization	8	9.4%

	N	Mean	Std. Dev	Median
Number of Hours in Primary Workplace:	160	40.05	14.784	40.11
Number of Hours in Secondary Workplace:	83	10.79	8.68	9.57

Primary Role in Primary Workplace:

	N	Rel. Freq.
Consultant	47	26.6%
Therapist	46	26.0%
Administrator	29	16.4%
Teacher	13	7.3%

Secondary Role in Primary Workplace:

	N	Rel. Freq.
Supervisor	17	9.6%
Researcher	14	7.3%

Role in Secondary Workplace:

	N	Adj. Feq.
Consultant	23	38.3%
Therapist	21	35.0%

Table IV

How consulting competencies were acquired (more than one possible):

	N	Rel. Freq.
Trial/Error	126	71.2%
Self-directed readings	108	61.0%
Continuing Ed.	98	55.4%
Apprenticeship	70	39.5%
Informal predoctoral training	52	29.4%
Inservice training	47	26.6%
Predoctoral practicum	44	24.9%
Predoctoral consultation course	31	17.5%

Most important factor in decision to become a consultant:

	N	Relative Frequency
Primary Factors		
Desire to broaden impact	35	19.8%
Intrinsic rewards	31	17.5%
Desire to try new service	16	9.0%
Chance opportunities	16	9.0%
Financial rewards	15	8.5%
Secondary Factors		
Financial rewards	29	16.4%
Desire to broaden impact	26	14.7%
Intrinsic rewards	25	14.1%
Desire to try a new service	15	8.5%

	N	Mean	Median	Std.Dev.
How much average income from consulting:	129	$32,798	$20,063	$32,571
What percentage of total income is from consulting:	142	45%	29.6	38.6

Table V

	N	Mean	Median	Std.Dev.
Average amount of time (hours) spent consulting in primary job:	135	17.43	12.33	15.52
Average amount of time (hours) spent consulting in secondary job:	106	5.03	1.86	8.68

Internal/external consultant in primary job:

	N	Adj. Freq.
Internal	37	28.5%
External	93	71.5%

Internal/external consultant in secondary job:

Internal	9	12.5%
External	63	87.5%

	N	Mean	Median	Std.Dev.
Number of organizations working with currently as an external consultant:	133	6.15	3.20	8.47

Number and types of organizations consulted with (as measured by a 5 point Likert scale, 1 = rarely, 5 = frequently):

	N	Mean	Median	Std.Dev.
Public sector human services	30	2.03	1.18	2.69
Private sector human services	23	1.39	1.21	.65
Governmental agencies	24	7.17	1.25	21.09
University organizations	22	1.13	1.05	.46
Business and industry	61	7.03	3.67	9.21
Hospital and medical settings	30	1.47	1.21	.82

Table VI

Extent of typical length of time spent consulting with an organization (as measured by a 5 point Likert scale.1 = rarely, 5 = frequently):

	N	Mean	Median	Std.Dev.
less than one month	97	2.30	1.41	1.62
1-3 months	86	2.52	2.39	1.34
4-6 months	81	2.36	2.41	1.14
7-9 months	80	2.33	2.28	1.20
10-12 months	83	2.61	2.64	1.22
>12 months	118	4.19	4.71	1.30

Number of direct contacts with an organization during a consultation (as measured by a 5 point Likert scale.1 = rarely, 5 = frequently):

	N	Mean	Median	Std.Dev.
1-5 contacts	97	3.10	3.35	1.76
6-10 contacts	83	2.89	2.79	1.33
11-15 contacts	80	2.75	2.75	1.28
16-20 contacts	77	2.55	2.40	1.39
>20 contacts	111	3.78	4.70	1.72

Percent of direct contacts with individuals:	142	63.92	74.78	28.69
Percent of direct contacts with groups:	133	39.79	30.5	28.71
What percentage of consulting done as part of a team:	140	18.47	6.0	26.41
How many consultants compose the team:	106	2.72	2.20	2.45

	N	Adj. Frequency
Are all team members psychologists:		
Yes	40	38.5%
No	64	61.5%

Table VII

What consultation models are used (as measured by a 5 point Likert scale.1 = rarely, 5 = frequently):

	N	Mean	Median	Std.Dev.
Organizational model	129	3.60	3.83	1.32
Education and training model	135	3.38	3.49	1.45
Clinical model	134	3.35	3.54	1.48
Program model	134	3.10	3.15	1.35
Consultee-centered--mental health model	124	3.05	3.12	1.41
Behavioral model	119	2.70	2.43	1.51
Psychiatric liason	125	2.41	1.46	1.66

To what extent is each level of client consulted with (as measured by a 5 point Likert scale.1 = rarely, 5 = frequently):

	N	Mean	Median	Std.Dev.
CEO	130	3.63	4.11	1.48
Upper management	132	4.17	4.58	1.16
Middle management	133	3.98	4.26	1.15
Employees who report-to middle management	124	2.92	2.84	1.36
Organization's clients or consumers	117	2.21	1.45	1.56

Why are you asked to consult (as measured by a 5 point Likert scale.1 = rarely, 5 = frequently):

Solving problems	137	4.35	4.56	.81
Coping with a crisis	130	3.64	3.76	1.21
Work for developmental goals	129	3.53	3.83	1.44
Preventing problems	129	3.52	3.62	1.20
Adapting to environmental changes	122	2.89	2.90	1.38
Strategic planning	123	2.82	2.82	1.40

TABLE VIII

The extent to which the following functions are characteristic of practice (as measured by a 5 point Likert scale, 1 = rarely, 5 = frequently):

	N	Mean	Median	Std Dev.
Stimulating client's thinking	141	4.25	4.64	1.01
Recommending specific actions	138	3.98	4.40	1.22
Offering different perspective	133	3.97	4.11	1.02
Facilitating problem solving	137	3.92	4.10	1.09
Providing specific advice	133	3.62	3.75	1.24
Giving expert information	136	3.57	3.67	1.21
Encouraging support for certain social values	128	2.46	2.27	1.27
Assisting staff with short-term overload	127	1.92	1.40	1.26
Supporting specific political values	127	1.30	1.12	.74

Who frequently decides the goals and direction of the consultant's role (as measured by a 5 point Likert scale, 1 = rarely, 5 = frequently):

	N	Mean	Median	Std Dev.
Clients make all these decisions	113	2.10	1.72	1.25
Client makes most decisions	109	2.78	2.75	1.19
Collateral decision	132	4.42	4.72	.88
Consultant make most decisions	113	2.51	2.31	1.13
Consultant makes all decisions	109	1.54	1.2	1.00

Table IX

Are clients influenced by consultant's age in deciding hire one:

	N	Adj.Freq.
Yes	113	81.9
No	25	18.1

	N	Mean	Median	Std.Dev.
How strong is age preference:	123	3.20	3.32	1.13

Ranking of age groups:

	N	Rel. Freq
As most preferred		
40-49 yrs.	73	41.2%
50-59 yrs.	17	9.6%
Next preference		
50-59 yrs.	45	25.4%
40-49 yrs.	25	14.1%
30-39 yrs.	14	7.9%

Are clients influenced by consultant's sex in deciding hire one:

Yes	105	59.3%
No	31	17.5%
Which sex preferred		
Male	101	57.1%
Female	3	1.7%

	N	Mean	Median	Std.Dev.
How strong is sex preference:	125	3.19	3.40	1.13

Are clients influenced by consultant's ethnicity in deciding hire one:

Yes	100	56.5%
No	33	18.6%

	N	Mean	Median	Std.Dev.
How strong is ethnicity preference:	133	3.07	3.12	1.22

Which ethnicity is preferred:	N	Relative frequency
As first preference: White	88	49.7%
Black	1	.6%
As second preference:		
Asian	48	27.1%
Hispanic	14	7.9%
Black	13	7.3%